

Initial Unannounced Full Partial Follow-up Location Change Investigation Other

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Childrens Day School of Wilton Date: 12/1/21 Time: 12:40 pm

Location Address: 111 Ridgely Rd Wilton Ct. 06897 Telephone #: (203) 762-8001

e-mail address: office@cdsw.org License #: 15135 Expiration Date: 11-30-24

Capacity: 96 # of Children Present: 45 # of Staff Present: 9

Consent to Inspect I agree to allow the Office of Early Childhood to have access to and inspect this facility and all
Family Child Care Home child care records as required by Family Child Care Home Regulations.
Provider/Applicant/Substitute's Signature _____

Purpose of visit: Partial

Observations/Corrections needed:

- 1- in compliance expires 7-15-23
- 2- Diswsed- no summer/new staff currently
- 5- In compliance
- 16- Diswsed- no summer/new staff currently
- 38- In compliance
- 45- In compliance
- 69- In compliance
- 89- In compliance
- 92- In compliance
- 110- In compliance
- 111- In compliance
- 112- In compliance
- 119- In compliance
- 19a-79-3a (a) masks- In compliance
- 19a-79-7a(e)(16)-in compliance

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: N/A

Signature: [Signature]
(OEC Representative)
Terri Roberts

Signature: [Signature]
(Person in Charge)
Elizabeth Cristoni